PTO/SB/06 (08-03)
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		NT APPLICA	Substitut	e for Form PTO	-875			19/	Soch Beyer Ann	<u></u>
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED			NUMBER EXTRA		RATE	FEE		RATE	FEE	
ASIC FEE 7 CFR 1.16(a))						s	OR		s	
OTAL CLAIMS			minus 20			x \$=		OR	x s _ =	
	PENDENT CLAIM	s						i '		
77 CFR 1.16(b)) minus 3 = .					x \$=		OR	x \$=		
UL	TIPLE DEPENDEN	IT CLAIM PRESEN	T (3	7 CFR 1.16(d))		+ \$=		OR	+ s=	
If the difference in column 1 is less han zero, enter o in column 2.						TOTAL	Ĺ	OR	TOTAL	
	1/16	AIMS AS AME	NDET	PART II						
	PART II							OR	OTHER	THAIN
_/	1,00	(Column 1)		(Column 2)	(Column 3)	SMALL E	ENTITY	• OK	SMALL	
ENI A	3/21/05	REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	-	RATE	ADDI- IONAL FEE
DME	Total	AMENDMENT 7	Minus	"39	= /	x s =	1:	OR	x s =	1
Ž	(37 CFR 1.16(c)) Independent	. 1	Minus	- 2	= /		1	1		
AMEN	(37 CFR 1.16(b))	<u> </u>		<u> </u>		_ x s=	 	OR	x s=	+
∢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1-16(d))					+ s=		OR-	+3	
						TOTAL ADD'L FEE	Ľ	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
Φ.		CLAIMS —REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-]	RATE	ADDI- TIONAL
Ż	-	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE	_		FEE
DME	Total (37 CFR 1.16(d))	•	Minus		=	x s=		OR	x S =	
END	Independent	•	Minus		=	x s _ =		OR	x s =	
AME	(37 CFR 1,16(b))	l	1			^ J				<u> </u>
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s= TOTAL	-	OR	+ s =	
						ADD'L FEE	L	OR	ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)	A STATE OF THE PARTY NAMED IN		-		
CLC		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- T!ONAL FEE		RATE	ADDI- TIONAL FEE
ENDMEN	Total .	AMENDMENT	Minus	PAID FOR	=			1	¥ c	
	(37 CFR 1.16(c)) Independent		Minus	•••	=	X \$=	 	OR		
_	(37 CFR 1.16(b))			<u> </u>	<u> </u>	x s=		OR	x s =	
핒	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37, CFR 1:16(d))					+ s =	T	OR"		I
AME	FIRST PRESEN	TATION.OF. MULTIP				TOTAL		⊣	TOTAL	+

€ 9

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.